## L0800087379

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
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S. HAWKES

APR - 3 2009

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: USK Construction (Name of Lin	mited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	c Change and fee(s) are submitted for filing.
Please return all correspondence concerning this i	matter to the following:
Wes Kallas (Name of Person)	
WSK Construction UC (Firm/Company)	
6332 Lee Ann Lave (Address)	
Naples, FL 34109 (City/State and Zip Code)	
For further information concerning this matter, pla	ease call:
Wes Kallas at (	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
\$25 Filing, Fee	\$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	Instruction LLC
2. (a) Principal office address of limited liability compar ( <i>Note: MUST BE STREET ADDRESS</i> )	ny: 5730 Houchin St. Naples, FL 34109
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5730 Houchin Sts Naples, Fe 34109
9-15-2008	L08000087379
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	Business Filings Incorporated
Registered Office Address:	1203 Governors Square Blud Ste 10. Talbhassee, FL 33301-2960
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	. Shellee Kallas
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Naples ,FL 34/09
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company.	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
(Signature of a member or authorized representative of a member)	_
Shellee Kallas (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notifie	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.